

2025 Long Term Care Hospital Services Projected Bed Need Summary by LTCH Planning Area

2025 Long Term Care Hospital Bed Need Projection Summary Pursuant to Rule 111-2-2-.36											
LTCH Planning Areas	Step 1	Step 2		Step 3		Step 4				Step 5	Step 6
	2019 Acute Care Discharges	2019 Resident Population	2019 Acute Care Discharge Rate/1000	2025 Resident Population	Projected Acute Care Discharges	(i)	(ii)	(iii)	(iv)	Authorized LTCH Beds	LTCH Surplus/ (Deficit)
						Projected Discharges Needing LTCH Services	Projected LTCH Discharge Days	Projected Average Daily LTCH Census	Projected LTCH Beds Needed at 85% Occupancy		
1	530,272	7,516,856	70.5	8,151,010	540,508	7,027	257,173	705	828	574	(254)
2	120,683	1,200,653	100.5	1,246,590	117,782	1,531	56,041	154	180	140	(40)
3	86,489	1,021,559	84.7	1,048,055	83,408	1,084	39,686	109	127	50	(77)
4	81,525	1,026,804	79.4	1,092,814	81,560	1,060	38,806	106	125	90	(35)
Statewide	818,969	10,765,872	76.1	11,538,469	823,258	10,702	391,706	1,073	1,260	854	(406)
Notes and Sources: LTCH Planning Areas: Same as Comprehensive Inpatient Physical Rehabilitation Planning Areas. See DCH Rule 111-2-2-.36(2)(h). Step 1: Acute Care Discharges do not include Perinatal/Neonatal, Psychiatric and Substance Abuse, Inpatient Physical Rehabilitation, LTCH, Destination Cancer Hospital, and General Cancer Hospital discharges. Discharges from prior year Annual Hospital Questionnaires were used where 2019 data was unavailable. See DCH Rule 111-2-2-.36(3)(a)1. Step 2: Resident Population projection for 2019 from Office of Planning and Budget 2013-2025 Resident Population Projections, 4/1/2017 Release. Discharge rate for current acute care discharges. $[(\text{Current Acute Care Discharges} / (\text{Current Population} / 1,000))]$. See DCH Rule 111-2-2-.36(3)(a)2. Step 3: Resident Population projection for 2025 from Office of Planning and Budget 2013-2025 Resident Population Projections, 4/1/2017 Release. Projected acute care discharges with 6% inpatient physical rehabilitation overlap reduction $[(\text{Projected Population} / 1,000) \times \text{Current Discharge Rate}] \times 0.94$. See DCH Rule 111-2-2-.36(3)(a)3. Step 4 (i): Projected number of acute care discharges which may benefit from LTCH services is determined by adding a 1.3% utilization factor to the projected number of acute care discharges. $[(\text{Projected Discharges} \times 1.3\% \text{ Utilization Factor})]$. See DCH Rule 111-2-2-.36(3)(a)4(i). Step 4 (ii): Projected LTCH discharge days is determined by multiplying the projected LTCH discharges by 3 Year Average Length of Stay for LTCH of 36.60. See DCH Rule 111-2-2-.36(3)(a)4(ii). Step 4 (iii): Projected average daily census for LTCH services is determined by dividing the projected discharge days in Step 4(ii) by the number of days in the calendar year. See DCH Rule 111-2-2-.36(3)(a)4(iii). Step 4 (iv): Projected number of LTCH beds needed is determined using an 85% occupancy standard applied to the projected LTCH average daily census. $[\text{Projected Average Daily Census} / .85]$. See DCH Rule 111-2-2-.36(3)(a)4(iv). Step 5: Authorized (Existing & Approved) LTCH beds as of September 23, 2020. See DCH Rules 111-2-2-.36(2)(d) and 111-2-2-.36(3)(a)5. Step 6: [Existing and Approved LTCH Beds - LTCH Beds Needed]. See DCH Rule 111-2-2-.36(3)(a)6.											